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# EFFECTIVENESS OF THE RESPONSE TO THE EBOLA EPIDEMIC IN GUINEA 2014-2016 (LESSONS EARNED AND RECOMMENDATIONS MADE)

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**D**uring the 2014 Ebola outbreak in Guinea, the Ministry of health with the support of international partners, set up a National Strategy to stop the disease propagation and control the epidemic all over the country. A year later, a qualitative survey within the most affected areas including the health district of Gueckedou, Forécariah, Coyah, and Conakry in which around 100 people were questioned. The in depth interviews targeted stakeholders, partner organization managers, center of Ebola care and treatment managers, community leaders, traditional healers, mass media officers, community animators, and secured burial teams and the focus group discussion with youths, women association, health workers, community members. The main objectives of the evaluation were to pinpoint the overall effectiveness of the epidemic control activities; know the perceptions and the lessons learned during the epidemic; gather the main recommendations to the control of epidemic like Ebola in a given country. The evaluation results showed that: The majority (90%) of the interviewees has never heard about Ebola before the outbreak of 2014, those who have heard were informed during their training in medical school (virology) or via mass media on the previous epidemic in RD Congo. (85%) of them declared being reached through infection of a family member, neighbor, colleague or a well-known health professional. Seven out of 10 interviewees recognized the plus values and the efficiency of the international organization supports help to control of the epidemic think the disease was sent by stringers for experimentation purpose. The most contributing activities to the outbreak control were the multimedia communication (70%), the case management (70%), and the distribution of hygiene kits (90%) (hand washing devices, soap, and chlorine), and the national committee coordination (40%), the training of the response actors, the community engagement (90%), and the strengthening of the laboratory system (50%). The weaknesses of the Ebola response were: the discrepancy of the early message spread (which caused fear and panic among the population); the late of funding and international intervention; the multiplicity of the managing protocol used by the various partners; the "low level of skill of health workers to the prevention and infection control; the late of the community engagement and the reticence occurred. The majority of interviewees recommend that most important action to be taken to control an epidemic, like Ebola, should be: an early deflation of the epidemic by WHO; a quick and efficient international mobilization; an efficient carefulness actions to save the victims; an harmonized information about the epidemic; an early involvement of all actors including Communities leaders, Socio-anthropologists, traditional healers, youth women association; Almost all interviewed agreed on that the harm and the socioeconomic impact of Ebola in Guinea were related to the weaknesses of the country health system and the neglected of the early community engagement to the control activities.

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